24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 1 OF 6 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full) National Rifle Association of America Pol	itical Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553		
Check if 24-hour report X 48-hour report New report X Amends report filed on 09 05 2014				
Full Name of Payee Federal Capitol Communications Corpo	oration	Date of Public Distribution/Dissemination 09 04 04 09 04		
Mailing Address 950 F Street, NW, #525		Amount		
City	te Zip Code	500.00		
Washington	C 20004	Transaction ID : 61628322 Date of Disbursement or Obligation		
Purpose of Expenditure Graphic Art Design	Category/ Type 004	M = M / D = D / Y = Y = Y		
Name of Federal Candidate	X Support	Office Sought: House District:		
Benjamin Sasse	Oppose	President Senate State: NE		
Calendar Year-To-Date Per Election for Office Sought	0.00	Disbursement For: Primary General 2014 Other (specify) ▶		
Full Name of Payee Federal Capitol Communications Corpora	tion	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 950 F Street, NW, #525		Amount		
City	te Zip Code	500.00		
Washington D	C 20004	Transaction ID : 61628323 Date of Disbursement or Obligation		
Purpose of Expenditure Graphic Art Design	Category/ Type 004	M = M / D = D / Y = Y = Y		
Name of Federal Candidate	X Support	Office Sought: House District:		
Shelley Capito	Oppose	President Senate State: WV		
Calendar Year-To-Date Per Election for Office Sought	0.00	Disbursement For:		
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 1000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures		··· >		
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Mary Rose Adkins Signature	[Electronically Filed] Date	e 10 02 2014		
5.ga.a.				

1mage# 14978048661 PAGE 2 / 6

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: F24A Transaction ID:

This amendment corrects a campaign committee error. The original report incorrectly used Shelly Moore Capito's House seat committee instead of her Senate campaign to report these expenditures.

Form/Schedule: Transaction ID:

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	101120	PAGE 3 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) National Rifle Association of America Political Vic	ctory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553	
Check if 24-hour report X 48-hour report New report	ort X Amends repor	t filed on 09 / 05 / 2014	
Full Name of Payee Master Print, Inc.		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address P.O. Box 1467		Amount	
	Zip Code	3487.08	
Newington VA Purpose of Expenditure	22122	Transaction ID : 61628325 Date of Disbursement or Obligation	
Print 4 Color Postcard	Category/ Type 004		
Name of Federal Candidate Benjamin Sasse	Support Oppose	Office Sought: House District: President X Senate State: NE	
Calendar Year-To-Date Per Election for Office Sought	0.00	Disbursement For: Primary ☐ General 2014 ☐ Other (specify) ▶	
Full Name of Payee Master Print, Inc.	1	Date of Public Distribution/Dissemination M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y	
Mailing Address P.O. Box 1467		Amount	
City State Newington VA	Zip Code 22122	3768.62 Transaction ID : 61628326	
Purpose of Expenditure Print 4 Color Postcard	Category/ Type 004	Date of Disbursement or Obligation	
Name of Federal Candidate	X Support	Office Sought: House District:	
Shelley Capito Calendar Year-To-Date	Oppose	President Senate State: WV Disbursement For: Primary General	
Per Election for Office Sought	0.00	2014 Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		7255.70	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins [Electronic Signature	cally Filed] Date	10 02 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼
	C C00053553
Check if 24-hour report 48-hour report New report Amend	ds report filed on 09 / 05 / 2014
Full Name of Payee Prolist Inc.	Date of Public Distribution/Dissemination
	09 / 04 / 2014
Mailing Address 8341 Beechcraft Avenue	Amount
City State Zip Code	37173.41
Gaithersburg MD 20879-1509	Transaction ID : 61628328 Date of Disbursement or Obligation
Purpose of Expenditure Postage Category/ Type	004
Name of Federal Candidate Supp	port Office Sought: House District:
Benjamin Sasse Opp	
Calendar Year-To-Date Per Election for Office Sought 0.00	Disbursement For: Primary General 2014
	Other (specify) -
Full Name of Payee Prolist Inc.	Date of Public Distribution/Dissemination
Mailing Address 8341 Beechcraft Avenue	09 04 2014 Amount
	20000 07
City State Zip Code Gaithersburg MD 20879-1509	39293.37 Transaction ID : 61628329
	Date of Disbursement or Obligation
Purpose of Expenditure Postage Category/ Type	004 M M / D D / Y Y Y Y
Name of Federal Candidate Sup	port Office Sought: House District:
Shelley Capito Opp	1407
Calendar Year-To-Date Per Election for Office Sought 0.00	Disbursement For: ☐ Primary ☐ General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	76466.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or a party committee) any political party committee or its agent.	
Mary Rose Adkins [Electronically Filed]	Date 10 02 2014
Signature	32 231

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	21131131123	PAGE 5 OF 6 FOR SE OF FORM 24/48	
National Rifle Association of America Politica	al Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553	
Check if 24-hour report X 48-hour report No	ew report X Amends report fil	ed on 09 05 2014	
Full Name of Payee Prolist Inc.		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 8341 Beechcraft Avenue		Amount	
City State	Zip Code	2719.56	
Gaithersburg MD	20879-1509	Transaction ID: 61628331 Date of Disbursement or Obligation	
Purpose of Expenditure Postcards	Category/ Type 004	M = M / D = D / Y = Y = Y	
Name of Federal Candidate	X Support Off	fice Sought: House District:	
Benjamin Sasse	Oppose	President Senate State: NE	
Calendar Year-To-Date Per Election for Office Sought	0.00 Dis	sbursement For: Primary X General Other (specify) ▶	
Full Name of Payee Prolist Inc.		Date of Public Distribution/Dissemination	
Froist Inc.		09	
Mailing Address 8341 Beechcraft Avenue		Amount	
City State	Zip Code	2939.13	
Gaithersburg MD	20879-1509	Transaction ID : 61628332 Date of Disbursement or Obligation	
Purpose of Expenditure Postcards	Category/ Type 004	M = M / D = D / Y = Y = Y	
Name of Federal Candidate	X Support Of	fice Sought: House District:	
Shelley Capito	Oppose	President Senate State: WV	
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary X General 114 Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	·····	5658.69	
(b) SUBTOTAL of Unitemized Independent Expenditures	·····		
(c) TOTAL Independent Expenditures	·····		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins [E	Electronically Filed] Date	10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

		FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) National Rifle Association of America Political Vic	FEC IDENTIFICATION NUMBER ▼		
		C C00053553	
Check if 24-hour report X 48-hour report New report	ort X Amends report filed	on 09 / 05 / 2014	
Full Name of Payee Classic Arms Productions, LLC		Date of Public Distribution/Dissemination	
Mailing Address P.O. Box 654		09 06 7 2014	
Walling Address P.O. Box 654		Amount	
City State	Zip Code	75.00	
Mandeville LA	70470	Transaction ID : 61628317 Date of Disbursement or Obligation	
Purpose of Expenditure Booth Rental	Category/ Type 004	M = M / D = D / Y = Y = Y	
Name of Federal Candidate	Support Office	e Sought: House District:	
Sen. Mary Landrieu	X Oppose	President Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought	0.00 Disbu 2014	ursement For: Primary X General Other (specify) ▶	
Full Name of Payee		Date of Public Distribution/Dissemination	
Tull Name of Fayee		M M / D D / Y Y Y Y Y	
Mailing Address		Amount	
City State	Zip Code		
		Date of Disbursement or Obligation	
Purpose of Expenditure	Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate	Support Office	e Sought: House District:	
	<u> </u>	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought	Disb	ursement For: Primary General	
To Election to Company		Other (specify) -	
(a) SUBTOTAL of Itemized Independent Expenditures	·····	75.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	·····		
(c) TOTAL Independent Expenditures	·	90456.17	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
	ically Filed] Date 1	0 02 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature			

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